



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Care Financing  
Administration  
Region IX

Refer to: MCD-RHR

75 Hawthorne St.  
Suite 401  
San Francisco, CA 94105

MAR 22 2001

Phyllis Biedess, Director  
Arizona Health Care Cost Containment System  
801 E. Jefferson  
Phoenix, AZ 85034

Dear Ms. Biedess:

Enclosed is an approved copy of Arizona State plan amendment #00-017, regarding income eligibility levels and post-eligibility treatment of institutionalized individuals. I am approving this SPA with the requested effective date of January 1, 2001.

If you have any questions, please have your staff contact Ronald Reepen at (415) 74-3601.

Sincerely,

Linda Minamoto  
Associate Regional Administrator  
Division of Medicaid

Enclosures

cc: Joan Peterson, HCFA, CMSO, FCHPG (with enclosures)  
Elliot Weisman, HCFA, CMSO, PCPG (with enclosures)

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DIRECTOR'S OFFICE  
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ARIZONA

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SECTION 1924 PROVISIONS

- A. Income and resource eligibility policies used to determine eligibility for institutionalized individuals who have spouses living in the community are consistent with Section 1924, except for those provisions set forth in Supplement 14 to Attachment 2.6A.
- B. In the determination of resource eligibility the State minimum resource deduction is \$ 17,400, subject to change in accordance with federal law.
- C. An institutionalized spouse who (or whose community spouse) has excess resources shall not be found ineligible under Title XIX of the Social Security Act, per Section 1924(c)(3)(C), where the State determines that denial of eligibility on the basis of having excess resources would work an undue hardship.

State: ARIZONA

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Citation

Condition or Requirement

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1924 of the Act

2.

The following monthly amounts for personal needs are deducted from total monthly income in the application of an institutionalized individual's or couple's income to the cost of institutionalized care:

435.725

435.733

435.832

Personal Needs Allowance (PNA) of Not Less Than \$30 For Individuals and \$60 For Couples. For All Institutionalized Persons.

a. Aged, blind, disabled:

Individuals     \$ 79.50

Couples        \$ \*

For the following persons with greater need:

Supplement 12a to Attachment 2.6-A describes the greater need; describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

b. AFDC related:

Children        \$ 79.50

Adults          \$ 79.50

For the following persons with greater need:

Supplement 12a to Attachment 2.6-A describes the greater need; describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

c. Individual under age 21 covered in the plan as specified in Item B. 7. of Attachment 2.2 -A.  
\$ 79.50

\* In Arizona, all applicants are treated as individuals. If two individuals are married, each would receive a Personal Needs Allowance of \$79.50.

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3. Supplemental Security Income:

Individual Federal Benefit Rate:	\$ 530
Couple Federal Benefit Rate:	\$ 796
300% Individual Federal Benefit Rate:	\$ 1,590

Revision: HCFA-PM-97-2  
December 1997

SUPPLEMENT 12a TO ATTACHMENT 2.6-A  
Page 1  
OMB No.: 0938-0673

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VARIATIONS FROM THE BASIC PERSONAL NEEDS ALLOWANCE

Individuals who have received institutional services less than 30 days: \$1,590 (allowed by waiver)

Individuals receiving HCBS: \$1,590 (as allowed by 42 CFR 435.726 and the 1115 waiver which allows the State to provide HCBS to individuals whose income does not exceed 300% of SSI.)

Individuals who have received HCBS: \$1,590 (as allowed by 42 CFR 435.726 and the 1115 waiver which allows the State to provide HCBS to individuals whose income does not exceed 300% of SSI.)